

Fee purpose only

Via Official Fax no 703-872-9306

**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)
FY 2005 (fees effective on or after October 1, 2004)**

Application Number	10/045,830	Filed:	29 October 2001
Art Unit	2873	Examiner	Sugarman
Docket No.	3DS1.032	Confirmation No.	3697
For	THREE-DIMENSIONAL DISPLAY SYSTEM		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fees are as follows (check time period desired and enter the appropriate fee below):			
	Fee	Small Entity Fee	
One month (37 CFR 1.17(a)(1))	\$110	\$55	\$
Two months (37 CFR 1.17(a)(2))	\$430	\$215	\$215.00
Three months (37 CFR 1.17(a)(3))	\$980	\$490	\$
Four months (37 CFR 1.17(a)(4))	\$1530	\$765	\$
Five months (37 CFR 1.17(a)(5))	\$2080	\$1040	\$
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge the \$215.00 fee, charge any additional fees which may be required, or credit any overpayment to Deposit Account Number 05-0845. I have enclosed a duplicate of this sheet.			
I am the applicant/inventor.			
assignee of record of the entire interest. See 37 CFR 3.71.			
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number 24,404			
attorney or agent under 37 CFR 1.34(a).			
Registration number if acting under 37 CFR 1.34(a) .			
Date: 17 November 2004 Signature: /Gerry Jay Elman/			
Telephone Number: 610-892-9942 Typed or printed name: Gerry J. Elman			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
Total of forms are submitted. 1			
This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			

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PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

Application or Docket Number

10/045830
1135-032

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	15	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	15 minus 20 = *	
INDEPENDENT CLAIMS	11 minus 3 = *	8
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	11/17	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	7	Minus	20 = -
Independent	4	Minus	11 = -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE	OR	RATE	FEE
BASIC FEE	370.00	OR	BASIC FEE	740.00
X\$ 9=		OR	X\$18=	
X42=	336	OR	X84=	236
+140=		OR	+280=	
TOTAL	706	OR	TOTAL	706

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	

TOTAL
ADDIT. FEE

TOTAL
ADDIT. FEE

RATE **ADDI-TIONAL FEE**

RATE **ADDI-TIONAL FEE**

X\$ 9=

X\$18=

X42=

X84=

+140=

+280=

TOTAL
ADDIT. FEE

TOTAL
ADDIT. FEE

RATE **ADDI-TIONAL FEE**

RATE **ADDI-TIONAL FEE**

X\$ 9=

X\$18=

X42=

X84=

+140=

+280=

TOTAL
ADDIT. FEE

TOTAL
ADDIT. FEE

RATE **ADDI-TIONAL FEE**

RATE **ADDI-TIONAL FEE**

X\$ 9=

X\$18=

X42=

X84=

+140=

+280=

TOTAL
ADDIT. FEE

TOTAL
ADDIT. FEE

RATE **ADDI-TIONAL FEE**

RATE **ADDI-TIONAL FEE**

X\$ 9=

X\$18=

X42=

X84=

+140=

+280=

TOTAL
ADDIT. FEE

TOTAL
ADDIT. FEE

RATE **ADDI-TIONAL FEE**

RATE **ADDI-TIONAL FEE**

X\$ 9=

X\$18=

X42=

X84=

+140=

+280=

TOTAL
ADDIT. FEE

TOTAL
ADDIT. FEE

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	*	Minus	** =
Independent	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	*	Minus	** =
Independent	*	Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.